


Electronic Filing System (EFS) Data

Electronic Patent Application Submission

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EFS ID:	19763	
Application ID:	10065707	
Title of Invention:	Mechanical Torque Table and Method	
First Named Inventor:	Corey Courts	
Domestic/Foreign Application:	Domestic Application	
Filing Date:	null	
Effective Receipt Date:	2002-11-12	
Submission Type:	Utility Patent Filing	
Filing Type:	new-utility	
Confirmation Number:	0	
Attorney Docket Number:	SPE-13	
Digital Certificate Holder:	cn=Daniel N. Lundeen, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S. Government, c=US	
Certificate Message Digest:	lorw9A8kj6hlcXIFbRx2Q==	
Total Fees Authorized:	\$1292.0	
Payment Category:	DA - Deposit Account	
Deposit Account Number:	501285	
Deposit Account Name:	David B. Dickinson	

TRANSMITTAL FORM



Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility Patent
Filing

Attorney Docket
Number:

SPE-
13

Mechanical Torque Table and Method

First Named Inventor: Mr. Corey M. Courts

SUBMITTED BY

Name: Mr. David B. Dickinson
Registration Number: 47525
Electronic Signature Mark: /s/ Date Signed: 20021112

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration	dpoa.tif
bibd-transmittal	spe-013apds.xml
specification	spe13.xml
fee-transmittal	spe-013fee.xml

Attached Image File(s):

App_ID=10065707

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dpoa.tif

Comments:

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention of **MECHANICAL TORQUE TABLE AND METHOD** the specification of which:

☒ is attached hereto.
☐ was filed on: _____, as Application Serial No. _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, §119 of any foreign or provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign or provisional application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

PRIOR APPLICATION(S):

Priority Claimed	Number	Country	Date Filed
Yes	60/319,191	US	4/16/2002

I hereby claim the benefit under Title 35, United States Code, §120 of any United States Application(s) listed below, and, in the subject matter of each of the claims of this application is not disclosed in the prior United States application in the event provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)
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I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, with full power of substitution and revocation:

Name	Registration No.	Address Telephone Calls and Correspondence to:
Daniel N. Lundeen	31,177	David B. Dickinson
David B. Dickinson	47,525	Lundeen & Dickinson, L.L.P.
Howard Lee Huddleston	51,824	P.O. Box 131144
		Houston, Texas 77219-1144
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I hereby declare that all statements made of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the making of such statements are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issued thereon.

INVENTOR'S FULL NAME: COREY M. COURTS

INVENTOR'S SIGNATURE: Corey M. Courts

Date: 11-2-02

CITIZENSHIP: U.S.

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ADDITIONAL JOINT INVENTOR(S) LISTED ON ATTACHED SHEET: ☐ Yes ☒ No

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1292

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 501285



Deposit Account Name: Lundeen & Dickinson

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: David B. Dickinson

Electronic Signature Mark: /s/

Date Signed: 20021112

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	1001	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 17	1202	\$ 18	0	\$ 0
Independent Claims: 6	1201	\$ 84	3	\$ 252

Subtotal For Extra Claims Fees: \$ 252

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Publication Fee For Early or Voluntary Publication		1	1504	\$ 300	\$ 300

Subtotal For Additional Fees: \$ 300